

May 2009

## **DRAFT: Bachelor of Arts in Healthcare Leadership University of Washington Tacoma**

### **Introduction**

The University of Washington Tacoma (UWT) seeks approval to establish a Bachelor of Arts degree in Healthcare Leadership. Housed within UWT's Nursing Program, the Healthcare Leadership degree program would target lower-division UWT students interested in health-related fields and students who have a technical degree in health-related fields such as respiratory care.

The program would enroll 10 FTE students in fall 2009 and would achieve full enrollment of 30 FTE by 2012. At full enrollment, it would graduate 15 students per year, who would be prepared for leadership roles<sup>1</sup> in healthcare delivery organizations; insurance or payer organizations; medical product companies; and government agencies.<sup>2</sup> Graduates would also be prepared for future graduate studies in fields such as health care services and health care administration.

### **Relationship to Institutional Role and Mission and the Strategic Master Plan for Higher Education in Washington**

According to its mission statement, UWT educates diverse learners and transforms communities by expanding the boundaries of knowledge and discovery. UWT's vision includes a commitment to an interdisciplinary approach and a strong relationship with surrounding communities. The proposed program aligns with the mission and vision in that it would prepare students for careers in leadership positions across a spectrum of healthcare settings, using an interdisciplinary approach culminating in a fieldwork experience at a healthcare organization in one of the surrounding communities.

---

<sup>1</sup> Program planners define a healthcare leader as anyone who is in a position of being able to affect the quality of healthcare delivery. In the context of the proposed program, they see leadership as being a broader concept than management or administration.

<sup>2</sup> Leadership roles would occur at various positions in these organizations, regardless of whether they are formal management or administrative positions. For example, graduates could put their healthcare leadership training to good use working as hospital shift leaders or quality management technologists; as insurance company provider relations coordinators or process improvement coordinators; as pharmaceutical company marketing associates or quality control analysts; or as government policy analysts or quality assurance associates.

In addition, the proposed program would support the *Strategic Master Plan for Higher Education* by increasing the number of people in the South Puget Sound area who have the requisite healthcare leadership knowledge, skills, and abilities to meet current and emerging healthcare needs. Currently, a number of entry-level healthcare related degrees are associate degrees. By serving a target audience that includes holders of such degrees, the proposed program would support the Master Plan in terms of creating worker-friendly career pathways between healthcare-related two-year and four-year degree programs.

## **Diversity**

To supplement UWT's campus-wide diversity efforts, program personnel would develop and implement the various diversity enhancing strategies, including the following:

- Collaborate with UWT's Diversity Resource Center to provide outreach for students;
- Reach out to potential students by connecting them with selected student organizations (e.g., the Black Student Union, Asian Pacific Islander organization) at UWT and at community colleges as well as health-related professional organizations;
- Provide an advising/support program for students from diverse backgrounds, involving faculty, staff, and students;
- Have multiple faculty members teach an undergraduate course in diversity;
- Continue to have faculty take leadership positions on the campus-level diversity committee to include co-chairing the committee; and
- Support faculty research in the area of diversity.

## **Program Need**

The proposed program would respond to the needs of students, employers, and community stakeholders and would not unnecessarily duplicate existing programs in the state. The Higher Education Coordinating Board (HECB) *State and Regional Needs Assessment* recommends the development of new programs and/or delivery mechanisms in healthcare to meet employer and student demand. The proposed program would be responsive to that recommendation by offering a new pathway for individuals to enter the healthcare field or to advance up a healthcare career ladder.

As evidence of student need, program planners cite a 2008 needs survey administered by the UWT Office of Institutional Research to 338 lower-division students. Twenty-two students (7%) indicated that they would enroll in the major if offered; seventy (21%) indicated that they were interested, and seventy-two (21%) indicated that they were vaguely interested. As an additional measure of student need, program planners surveyed institutions that are members of the Association of University Programs in Health Administration (AUPHA). Out of 62 member institutions, 15 responded, 12 of which reported increasing enrollment.

As evidence of employer need, program planners note that *A Skilled and Educated Workforce*<sup>3</sup> reports increasing vacancies in various occupations in the health sciences, including health care support personnel. In addition, US Department of Labor data suggest that employer need for healthcare workers is relatively robust during a recession when compared to other fields. It seems reasonable to infer that if employers need larger numbers of healthcare employees in various health sciences occupations, they will also need larger numbers of employees with healthcare leadership skills in those occupations, even during a recession.

To assess community need, program planners administered a survey to five members of a Community Advisory Board who represented Clover Park Technical College, Franciscan Healthcare System, Olympic College, Tacoma Community College, and Tacoma-Pierce County Health Department. All of the respondents indicated the major was “very needed.” The proposal also included letters of support from the Chief Executive Officer of Franciscan Healthcare System and the Director of Human Resources at MultiCare Health System. Both letters indicated a desire to offer fieldwork opportunities for healthcare leadership students.

With regard to program duplication, program planners note that other than on-line degrees, there are no undergraduate degrees in healthcare leadership in the Puget Sound Region. Although Central Washington University offers a BS in Safety and Health Management at Des Moines and Lynnwood and a BAS in Safety and Health Management at Des Moines, Pierce College, and SeaTac Center, the proposed program differs in focus and target student audience.

## **Program Description**

The proposed program would prepare students to be healthcare leaders by providing theoretical and experiential learning focused on critical knowledge associated with setting vision, guiding change, leading teams and inspiring people within the context of access, cost, and quality. Program planners distinguish leadership from management or administration by noting that leaders guide and influence an organization, regardless of their position. Leaders “do the right thing” whereas managers and administrators “do things right”.<sup>4</sup>

The proposed program’s target audience would include UWT lower-division students interested in entering a healthcare field and students who already hold a technical degree. Courses would be offered at the Tacoma campus and would use hybrid, face-to-face/on-line delivery.

To be admitted, students must have completed at least 90 credits with an overall GPA of at least 2.5; satisfied general education requirements; and completed a course in statistics and a course in anatomy and physiology, human biology, or medical terminology. To facilitate access for transfer students, program planners intend to develop articulation agreements with community colleges in King, Kitsap, Mason, Thurston, Grays Harbor, and Pierce counties, as well as others in southwest Washington.

---

<sup>3</sup> Jointly prepared by the Higher Education Coordinating Board, the State Board for Community and Technical Colleges, and the Workforce Training and Education Coordinating Board.

<sup>4</sup> The distinction is attributed to Warren Bennis, who has been credited as the professor who established leadership as a respectable academic field.

Once admitted, students would take 90 credits, including 55 credits of required core courses culminating in a five-credit fieldwork experience in a healthcare organization in the local community. The courses would focus on five knowledge domains identified by the Healthcare Leadership Alliance (HLA)<sup>5</sup> in a two-year project undertaken to ensure that healthcare leaders are prepared for future challenges. These knowledge domains are communication and relationship management; leadership; professionalism; knowledge of the healthcare environment; and business skills and knowledge. Each of these domains encompasses leadership competencies identified by the HLA during extensive job analysis and research.

In addition to the required core courses, students would take 20 credits of electives from health courses or selected minor or certificate courses, and 15 credits of free electives. Students would have the option of earning a minor in business administration, human rights, nonprofit management, urban studies, applied computing, Asian studies, or Hispanic studies; or a certificate in geographic information systems.

The program would mainly use existing courses. However, four new courses would be developed, including two in the leadership domain, one in the knowledge of the healthcare environment domain, and one in the business skills and knowledge domain. Courses would be taught primarily by existing tenure-track faculty. As the program grows, additional faculty would be hired as necessary.

Full-time students would normally complete the program in two years and would achieve the following learning outcomes:

- Use multiple communications strategies that enhance positive human relationships considering both clients/customers and work force personnel;
- Demonstrate the ability to integrate both theoretical and experiential knowledge relevant to leadership in the healthcare environment;
- Integrate ethical behaviors into leadership professional practice;
- Demonstrate knowledge of the healthcare environment that includes awareness of cost, access, and quality challenges, and an ability to generate solutions to these challenges; and
- Demonstrate basic budgeting, outcome measurement, and informatics abilities.

Student-learning outcomes would be assessed within individual courses, based on learning outcomes identified for those courses. Multiple measures of student learning would be used, including examinations, papers, student responses to case studies, and evaluations of field placements in healthcare leadership practice.

---

<sup>5</sup> The HLA consists of six professional societies representing over 100,000 members across healthcare management disciplines. Members include: American College of Healthcare Executives; American College of Physician executives; American Organization of nurse Executives; Healthcare Financial Management Association; Healthcare Information and Management System Society; Medical Group Management Association and its certifying body, the American College of Medical Practice Executives. One of the external reviewers for the proposal noted that these organizations are among the most important professional associations in the healthcare industry.

The proposed program would employ multiple program assessments, including:

- Review of student course evaluation summary data;
- Focus meetings with students;
- Review of student grades and analysis of student progress in program. Follow-up with students who withdraw from the program to determine reasons for dropping out and identify plans for returning for further study;
- Input from the Advisory Committee regarding program performance, followed up by faculty program committee review and development of action plans;
- End of program exit survey to determine satisfaction and extent to which goals are met;
- Alumni surveys to determine employment patterns (initial employment or employment changes after program completion, including data on scope and responsibility of position one, three, and five years after graduation; and
- Program satisfaction surveys administered to employers and alumni.

Data from all of the above approaches would be analyzed for themes or patterns and used to inform changes in the major.

## **Program Costs**

The proposed program would enroll 10 FTE students in the first year, growing to 30 FTE students at full enrollment. To implement the program, planners budgeted 0.15 FTE for faculty during the first year;<sup>6</sup> and 1.2 FTE for clerical/support staff and 2.2 FTE for faculty at full enrollment. The program would be funded by state FTE funds. Budget information provided by program planners indicates that the total revenue for the program would be more than sufficient to offset the total cost during start-up and all subsequent years.

At full enrollment of 30 FTE students, the direct cost of instruction would be \$211,126, or \$7,038 per FTE. In comparison, according to the HECB's *2005-06 Education Cost Study* (July 2007), the total cost of instruction per average annual upper division undergraduate health student FTE at public Washington institutions ranges from \$5,058 at Eastern Washington University to \$7,095 at UW Seattle. The total cost of instruction per average annual upper division undergraduate business student FTE at public Washington institutions ranges from \$3,689 at Central Washington University to \$8,265 at UW Seattle. The proposed program's cost per FTE lies within both ranges.

## **External Review**

Two reviewers reviewed the proposal: Dr. Suzanne Selig, Director of the Department of Health Sciences at the University of Michigan-Flint; and Dr. Donna Slovensky, Professor and Associate Dean for Academic and Student Affairs at the University of Alabama's School of Health Professions.

---

<sup>6</sup> The program has been designed to be launched without hiring additional faculty or staff during the first year.

Dr. Selig indicated mastering the five foundational knowledge domains would ensure graduates the basic knowledge and skills to assume mid-level management positions, creating a pool of future leaders for the region. She indicated the fieldwork component would be an important bridge to future employment opportunities for graduates. Dr. Selig expressed no concerns about the program and made no recommendations for improving it.

Dr. Slovensky indicated the conceptual framework for the curriculum, based on competencies identified by the HLA, encompasses job skills and knowledge required of healthcare leaders in multiple organization types. She also noted that the fieldwork requirement would provide students with an essential integrative experience and ultimately lead to job placement.

However, she cautioned that although the broad focus of the HLA competencies may be a program strength, it may also create challenges with regard to determining scope and depth of coverage for some content areas. In addition, she cautioned that allowing students to select from among a rather large number of minors and electives may lead to loss of program identity among employers. Program planners responded that core courses would provide sufficient depth, and electives would provide sufficient breadth. Program planners also responded that completing a minor would not change the profile of graduates from the perspective of employers, noting that all learners would complete the same set of required courses and that minors are intended to supplement the major but are not required.

## **Public Comment**

Ms. Violet Boyer, President and Chief Executive Officer of Independent Colleges of Washington (ICW) and Dr. Dennis Murphy, Provost of Western Washington University (WWU) submitted comment letters.

The ICW letter sought clarification regarding the relationship between a UWT master's program in Healthcare Leadership and the proposed program; the letter also questioned the efficacy of diverting 3.4 faculty and staff from the nursing department into the proposed program. Program planners responded that currently there is no master's program in Healthcare Leadership at UWT, although there are Master of Social Work (MSW) and Master of Nursing (MN) degrees. Neither degree focuses on healthcare leadership, although a three-course option on leadership is available to MN students; however, applicants to the MN program must be registered nurses, and would be better served by an undergraduate degree in nursing. Program planners further responded that the faculty teaching in the proposed program would not be diverted from teaching nursing courses. Rather, additional capacity would be made available in existing courses to accommodate students.

The WWU letter supported the proposed program and suggested exploring with area hospital administrators the idea of using the program to provide entry-level administrators. The WWU letter also suggested focusing more on business, computer systems, and new e-health initiatives. It further suggested including courses in systems and organization management, sociology, and/or communication courses, as well as making the core courses more interdisciplinary. Program planners responded that they have shared and will continue to share key information

about the program with the nursing program's advisory council, which includes administrators from three area hospitals. Program planners further responded by providing a detailed explanation of how existing elements of the program would cover content areas mentioned in the WWU letter and how the academic preparation, experience, and expertise of faculty would provide a rich pool of interdisciplinarity.

## **Staff Analysis**

The proposed program would support UWT's mission and the *Strategic Master Plan for Higher Education*. It would also employ multiple strategies to enhance diversity.

Program planners provided sufficient evidence of student, employer, and community need for the proposed program. Evidence from a UWT student survey and from a survey of peer institutions indicates student need. In addition, students would benefit from the opportunity to pursue a healthcare leadership degree without having to leave the Puget Sound Region. Plans to target both undergraduate students and practitioners with associate degrees should ensure a consistently strong applicant pool. Furthermore, state and federal reports imply employer need. Finally, a community advisory board survey and letters of support from area healthcare administrators indicate community need.

Students would be taught primarily by full-time, tenure-track faculty. In addition, students would study a curriculum whose organizing framework is based on job competencies extensively researched by a consortium of organizations noted by one reviewer as being among the most important professional associations in the healthcare industry. Students would be assessed in a variety of ways that would include a significant fieldwork experience. Program assessment would employ multiple measures as well.

The proposed program would build on existing faculty strengths, and its inclusion of face-to-face, as well as on-line delivery would differentiate the proposed program from the 100 percent online programs currently available to students in the region. The proposed program would be offered at a reasonable cost and would not require significant start-up expenditures.

Because of the potential for confusion between the concepts of healthcare leadership, healthcare management, and healthcare administration, HECB staff suggests program planners ensure the program's catalog description, Web pages, marketing materials, and advising staff make the distinction clear to students and describe how students would acquire leadership skills within the proposed program.

## **Staff Recommendation**

After careful review of the proposal and supporting materials, staff recommends approval of the Bachelor of Arts in Healthcare Leadership at the University of Washington Tacoma. The HECB's Education Committee discussed the proposal during its April 23, 2009 meeting and recommended approval by the full Board.

**RESOLUTION 09-07**

**WHEREAS,** The University of Washington Tacoma proposes to offer a Bachelor of Arts in Healthcare Leadership; and

**WHEREAS,** The program would support the university's mission and vision as well as the *Strategic Master Plan for Higher Education*; and

**WHEREAS,** The program would respond to student, employer, and community need and would give students an opportunity to pursue a healthcare leadership degree in the Puget Sound Region; and

**WHEREAS,** The program's students would study a curriculum whose organizing framework is based on job competencies extensively researched by a consortium of some of the most important professional associations in the healthcare industry; and

**WHEREAS,** The program has support from external reviewers; and

**WHEREAS,** The program would not unnecessarily duplicate existing programs; and

**WHEREAS,** The program would be offered at a reasonable cost;

**THEREFORE, BE IT RESOLVED,** that the Higher Education Coordinating Board approves the Bachelor of Arts in Healthcare Leadership at the University of Washington Tacoma effective May 12, 2009.

Adopted:

May 12, 2009

Attest:

\_\_\_\_\_  
Jesus Hernandez, Chair

\_\_\_\_\_  
Roberta Greene, Secretary